



December 1, 1999



Every year, more than 8,200 Washingtonians die from tobacco. That's close to the population of Ferry County, where I worked for 25 years. Every day, 65 children in our state become smokers, and a third will eventually die from it.

There is a solution. Washington's Tobacco Prevention and Control Plan will prevent children from ever starting to use tobacco and help smokers and other tobacco users quit. We know this plan will work, because it is based on state-of-the-art science and the successful experiences of other states.

Our state will receive \$4.5 billion in tobacco settlement funds over the next 25 years, thanks to the leadership of Attorney General Christine Gregoire. Governor Gary Locke and legislators dedicated \$100 million from the first payment for tobacco prevention and directed the state Department of Health to develop a "sustainable, long-term, and comprehensive tobacco control program." To help us develop the program, we formed the Tobacco Prevention and Control Council. The 16-member Council received input from six work groups, 150 young people, and about 200 residents from around the state.

The six key elements of the Washington plan are community-based programs, school-based programs, cessation, public awareness and education, reducing youth access to tobacco, and assessment and evaluation. All these elements are critical to the success of the plan; only a combined, comprehensive program will prevent youth from starting to use tobacco and help users quit. We also know that evaluating these programs over time and integrating all components at the local level are essential to reaching our goals: decreasing and preventing tobacco use in Washington.

The first-year investment in the program is about \$26 million — or 2% of Washington's annual health care costs due to tobacco-related illness. We are ready to begin work immediately. For the first time, our state will have the resources to reduce tobacco use. Young people are listening and looking to us to do the right thing.

Thank you,

A handwritten signature in cursive script, reading "Mary C. Selecky".

Mary C. Selecky  
Secretary of Health

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will have the resources  
necessary to reduce  
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# Tobacco Prevention and Control Council

Chair: Mary C. Selecky  
Secretary, Department of Health

The Honorable Christine Gregoire — Attorney General

The Honorable Terry Bergeson — Superintendent of Public Instruction

Keith Baldwin — Administrator, Samaritan Healthcare

Shannon Brewer — Youth, Spokane Teens Against Tobacco

Joe Finkbonner — Chair, American Indian Health Commission  
of Washington

Willa A. Fisher, MD, MPH — Health Officer,  
Bremerton-Kitsap County Health District

Nancy Giunto — Special Assistant to the Office of the CEO,  
Providence Health System

Robert Jaffe, MD — Washington State Medical Association;  
Director, Media and Policy Development, Washington DOC

Terry Lindquist, Ph.D., Superintendent, Puget Sound Educational Service District

Timothy A. McAfee, MD, MPH — Executive Director,  
Center for Health Promotion, Group Health Cooperative

Alonzo Plough, Ph.D., MPH — Director, Public Health —  
Seattle & King County

Ann Marie Pomerinke — CEO, American Cancer Society, Northwest Division

Kim Thorburn, MD, MPH — Health Officer, Spokane Regional Health District

Sue Vermeulen — Executive Director, King County Nurses Association

Vickie Ybarra, RN, MPH — Planning and Development Director,  
Yakima Valley Farm Workers Clinic, Washington State Board of Health

Brenda Suiter — Manager, Tobacco Prevention and Control Council

Jodi Suminski — Staff, Tobacco Prevention and Control Council

## Legislative Representatives

The Honorable Gary Alexander

The Honorable Alex Deccio

The Honorable Jeanne Edwards

The Honorable Pat Thibaudeau

## Advisers

Duane Thurman — Executive Policy  
Adviser, Governor's Office of  
Health Policy

Maxine Hayes, MD, MPH —  
Assistant Secretary, Department of  
Health

# Executive Summary

The Tobacco Prevention and Control Plan is Washington State's road map for fighting tobacco addiction, an epidemic that takes more than 8,200 lives and \$1.3 billion in health care costs in the state every year. The plan is designed to create one of the most cost-effective public programs in the state's history.

This report shows how Washington State can mobilize its citizens, communities, and government agencies to fight tobacco use.

## The tobacco problem

Tobacco is the nation's number one cause of preventable death, and its prevention and control is the Washington State Department of Health's top priority.

About 24% of Washington adults smoke. The problem is even worse for young people — 29% of high school seniors in the state smoke. Tobacco addiction starts young. Twelve is the average age at which people start smoking in Washington.

The Department of Health has reported that rates of tobacco use are much higher than the state average in parts of the state where people are more likely to have less education and to be poor. Some rural communities, some communities of color, and other minority groups also have higher rates of tobacco use.

This problem of disparity is made worse by the tobacco industry's well-

financed marketing, which targets high-risk areas and groups. The tobacco industry's more than \$100 million yearly advertising investment in Washington surpasses the state's current investment in tobacco prevention by about 50 to 1.

## The solution

Implementation of the Tobacco Prevention and Control Plan would ultimately reduce health care costs and increase both the lifespan and the quality of life for all who live in Washington. Based on successful tobacco prevention programs in several other states and on "best practices" compiled and defined by

### *Tobacco use causes —*

- *90% of deaths from chronic lung disease*
- *90% of lung cancer deaths*
- *45% of heart disease deaths in people younger than 65*
- *33% of all cancer deaths*
- *18% of stroke deaths*
- *10% of deaths of newborns*

the U.S. Centers for Disease Control and Prevention (CDC), the plan focuses on four broad goals:

- To prevent initiation of tobacco use among youth and young adults
- To promote quitting among youth and adults
- To eliminate exposure to environmental tobacco smoke (ETS)
- To identify and eliminate disparities related to tobacco use and its effects on different population groups

To achieve these goals, the Washington Tobacco Prevention and Control Council — 16 experts, elected officials, community members, and public health officials and the hundreds of individuals and organizations working with them — developed a plan with six essential program components. They are:

### **Community-based programs**

Working at the local level and building on a statewide network of public and private programs, to support tobacco prevention and control. The plan also supports local community initiatives through a Youth Advisory Board, training and technical assistance, multicultural outreach and education, partnership grants, and a materials clearinghouse.

### **School-based programs**

Reaching youth through a comprehensive K-12 program designed to

increase student knowledge, change attitudes, and resist influences to use tobacco.

### **Cessation**

Helping tobacco users quit by providing access to social supports such as Quit Lines and to cessation services and treatment such as nicotine replacement for the uninsured. States where these services are readily available, especially to low-income people, show impressive quit rates.

### **Public awareness and education**

A mass media and public information campaign to help counter tobacco industry marketing. This approach has achieved dramatic results in preventing tobacco use by youth.

### **Youth access**

Reducing sales of tobacco products to underage youth by retailer education and performing compliance checks and enforcement. Washington's current program has shown the benefits of working with retailers to reduce youth initiation.

### **Assessment and evaluation**

Assessing and evaluating the effectiveness of tobacco prevention programs through data-gathering and analysis. This would build accountability into the plan.

These program components form the core of the Tobacco Prevention and Control Plan, but they would not be simply imposed on communities once tobacco settlement dollars become available.





The Council developed an approach that will work within Washington's existing substance abuse prevention and public health systems. These systems encompass five state agencies and community-based programs. The plan would also encourage private sector participation through partnerships with community-based organizations, employers, health care providers, and health care systems.

### **The Investment**

In the first year (Fiscal Year 2000), the work of the comprehensive tobacco plan would require an investment of \$26.2 million of funds set aside for prevention from Washington's share of the national tobacco settlement. Expenditures during Fiscal Year 2001 would be slightly less, at \$25.9 million.

The experiences of other states have proven that this investment will save lives and money now spent on health care, and it will reduce the burden of chronic disease and injury for everyone in the state. It would give Washingtonians a better quality of life.

Although the plan represents a great addition of resources to the state's current involvement in tobacco prevention, the costs pale beside the burden the state still bears in tobacco-related illness.

Under the leadership of Governor Gary Locke, Washington is the only state to dedicate all of its tobacco settlement funds to programs that protect and improve the health of its citizens. This plan honors that commitment.

### **A Cost-effective Tobacco Prevention Plan for Washington State\***

<b>Savings</b>	<b>3-year Goal (adult smoking rate drops 2%)</b>	<b>10-year Goal (adult smoking rate drops 6%)</b>
Early deaths prevented	28,000	84,000
Public (Medicaid) health care costs	\$136 million	\$408 million
All long-term medical costs	\$1.08 billion	\$3.24 billion

\* Figures assume sustainable implementation of the requested appropriation over a 10-year period.

# Tobacco Prevention and Control Account Budget — Fiscal Year 2000-01

## Plan Elements

**Community-based programs;  
statewide, regional, and  
local**

**School-based programs**

**Cessation**

**Public awareness  
and education**

**Youth access**

**Assessment and evaluation**

**Administrative costs**

## Activities

Develop and maintain tobacco prevention programs in communities and Tribes across the state, consistent with best practices. Work with state and local agencies to enhance existing substance abuse and prevention programs. Provide statewide and regional programs including a Youth Advisory Board, multicultural outreach and education, partnership grants, training and technical assistance, and a materials clearinghouse.

Promote a “no tobacco use” attitude among K-12 public school students by adopting and enforcing tobacco-free policies, integrating effective curriculum, and coordinating access to cessation services.

Support and finance toll-free youth and adult Quit Lines to help tobacco users quit. Develop initiatives to increase access to cessation services.

Conduct mass media and information campaigns to counter tobacco marketing. Statewide campaign would focus on high-risk groups and communities.

Build on Washington’s current programs to discourage sales of tobacco products to minors.

Conduct periodic surveys of Washington residents and program evaluations to study the effectiveness of program components.

Provide agency staffing to implement and monitor all aspects of the comprehensive program.

## Outcomes

Shift in outcomes about tobacco use; increased use of cessation programs; reduced disparities across population groups

Increased student knowledge; changed student attitudes; improved policy compliance; reduced youth initiation; decreased share of youth using tobacco

More tobacco users who quit; increased availability and use of cessation support; identification of effective programs, including those for youth and pregnant women.

Shift in attitudes about tobacco use; decreased use of tobacco; decreased intention by youth to start using tobacco

Increased number of retailers who do not sell tobacco products to youth

Measured progress and demonstrated program accountability

\*Council and plan development funded in current biennial appropriation

## Requested Budget\*

Grants to communities \$4.45 million  
Grants to Tribes \$390,000

### Statewide/regional

Youth Advisory Board \$250,000  
Multicultural \$750,000  
Partnership grants \$1 million  
Training/TA \$375,000  
Clearinghouse \$250,000

DOH Staff (2 FTEs) \$126,000  
**\$7.59 million**

School districts \$3.75 million  
ESDs \$975,000  
DOH Staff (1 FTE) \$63,000  
**\$4.79 million**

Adult and Youth Quit Line \$1.89 million  
TA/consultation \$125,000  
DOH Staff (.5 FTE) \$35,000  
**\$2.05 million**

Public information \$780,000  
Media campaign \$7.8 million  
DOH Staff (1 FTE) \$65,000  
**\$8.65 million**

Retailer education \$140,000  
**\$140,000**

Assessment, evaluation, and technical assistance \$2.19 million  
DOH Staff (1 FTE) \$53,000  
**\$2.24 million**

Interagency coordination \$230,000  
Operational costs \$547,000  
**\$777,000**

**Total: \$26.24 million**

# Creating Washington's Tobacco Prevention and Control Plan

